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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875					Application or Docket Number 10/532,341		Filing Date 04/22/2005		<input type="checkbox"/> To be Mailed	
APPLICATION AS FILED – PART I										
(Column 1)			(Column 2)		SMALL ENTITY <input checked="" type="checkbox"/> OR			OTHER THAN SMALL ENTITY		
FOR		NUMBER FILED	NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)	
<input type="checkbox"/> BASIC FEE (37 CFR 1.16(a), (b), or (c))		N/A	N/A		N/A			N/A		
<input type="checkbox"/> SEARCH FEE (37 CFR 1.16(k), (l), or (m))		N/A	N/A		N/A			N/A		
<input type="checkbox"/> EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))		N/A	N/A		N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))		minus 20 =	*		X \$ =			X \$ =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))		minus 3 =	*		X \$ =			X \$ =		
<input type="checkbox"/> APPLICATION SIZE FEE (37 CFR 1.16(s))		If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										
					TOTAL			TOTAL		
APPLICATION AS AMENDED – PART II										
(Column 1)			(Column 2)		SMALL ENTITY OR			OTHER THAN SMALL ENTITY		
AMEND	12/01/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	* 73	Minus	** 56	= 17	X \$26 =	442	OR	X \$ =	

		* 3								
	Independent (37 CFR 1.16(h))		Minus	***3	= 0	X \$110 =	0	OR	X \$	=

<input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))						<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA						
	Total (37 CFR 1.16(i))	*	Minus	**	=						
	Independent (37 CFR 1.16(h))	*	Minus	***	=						
	<input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))										
	<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))										

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.